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RUEHKS/AMCONSUL SAPPORO 1119
RUEAUSA/DEPT OF HHS WASHINGTON DC
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UNCLAS SECTION 01 OF 02 TOKYO 001031

SIPDIS

DEPT FOR OES/IHA COMELLA
DEPT FOR EAP/J
DOE/HSS PASS TO JOE WEISS, NICHOLAS CARLSON, JANE NAKANO
HHS PASS TO CDC
HHS FOR OGHA STEIGER, BHAT AND ELVANDER
DEPT PASS TO AID/GH/HIDN DENNIS CARROLL

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E.O. 12958: N/A
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SUBJECT: RERF CONTINUES VALUABLE RADIATION RESEARCH DESPITE BUDGET CUTS

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11. (U) Summary: The Radiation Effects Research Foundation's Scientific Council meeting on March 5 and 6 in Hiroshima underscored the importance of continuing research on long-term health effects on atomic bomb survivors. Multi-year studies involving voluntary participation of atomic bomb survivors and their children are leading to new understanding of the long-term effects of radiation exposure. Despite current budgetary pressures and aging facilities, this longstanding U.S.-Japan collaborative research effort continues to be of unique value to the global health community and our bilateral relationship. End summary.

Background

12. (U) The Radiation Effects Research Foundation (RERF) began in 1946 as the Atomic Bomb Casualty Commission (ABCC), established by the Truman Administration to study the long-term health effects of radiation among the atomic bomb survivors in Hiroshima and Nagasaki. Initially funded by the USG, official Japanese participation began in 1948. In 1975, the ABCC was reorganized as the RERF, a non-profit Japanese foundation that receives funding from Japan's Ministry of Health, Labor, and Welfare (MHLW) and the U.S. Department of Energy (DOE). The U.S. National Academy of Sciences serves as the project contractor for DOE. RERF maintains facilities in Hiroshima and Nagasaki.

Meeting Highlights Long-Term Radiation Studies

13. (SBU) On March 5-6, RERF leadership met in Hiroshima with members of their Scientific Council, a group of leading U.S. and Japanese medical researchers in several related fields, to review research efforts and future plans. Among the reports presented were updates on long-term clinical and genetic studies of atomic bomb survivors and their children. These studies rely entirely on the voluntary cooperation of atomic bomb survivors and their children and are driven in large measure by concern for their health.

14. (SBU) The Adult Health Study (AHS) began in 1958 and tracks cancer and non-cancer prevalence in a sample population of atomic bomb survivors, including those who were in utero at the time of the bombing. While 60% of atomic bomb survivors are no longer living,

RERF is expanding research on those who were less than 10 years old at the time of the bombing. There is evidence that this younger cohort is of highest risk for disease caused by exposure to radiation. As this younger cohort enters their 70s and 80s in the coming decades, RERF plans to continue gathering data with which to test this hypothesis.

15. (SBU) RERF's F1 Clinical Study is intended to assess the possible health effects among children of atomic bomb survivors. Begun in 2000, it has included a series of mail surveys and clinical studies to gather data and biological samples from nearly 12,000 men and women who were born after spring 1946 and whose parents survived the August 1945 atomic bombings. Contrary to previously-held hypotheses, data analysis from this study so far suggests little evidence for increased risk of cancer or non-cancer diseases for the children of atomic bomb survivors, even for those whose parents received relatively high doses of radiation. However, RERF emphasized that these results should be interpreted carefully and should not be considered as definitive. Given that the mean age of participants is only 46, the group has yet to enter their years of highest disease incidence. Moreover, a significant percentage was found to have hypertension and/or hypercholesterolemia, as defined by the study, which may indicate future risks of non-cancer disease. RERF underscored the need to continue to track this population over the next decades for a more complete analysis.

16. (U) For more details on RERF's research, please refer to the RERF website at <http://www.rerf.or.jp/index.html>.

GOJ Budget Cuts Continue to Sting

17. (SBU) Although research efforts were the focus of the meeting, RERF leadership raised concerns that GOJ budget cuts and employment rules are hindering their ability to upgrade their Hiroshima facilities and attract qualified post-doctoral researchers and retain senior department chiefs. GOJ budget cuts have prompted MHLW

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to mandate that RERF reduce their payroll by six employees per year for the next four years. The MHLW representative's comments during the meeting reinforced the feeling that the GOJ will remain hawkish on the RERF budget. RERF employs roughly 260 persons, including 43 scientific professionals at its facilities in Hiroshima and Nagasaki. Of the RERF's FY2005 budget of 3.7 billion yen, or approximately \$32 million, MHLW contributed \$18 million and DOE contributed \$14 million.

Senior Panel to Review Future Plans

18. (SBU) To help chart RERF's course for the next 20 years, a separate, independent Senior Review Panel, composed equally of U.S. and Japanese scientists, is reviewing future research plans and organizational issues and will make recommendations to the U.S. and Japanese governments. These will include recommendations on addressing RERF's outdated physical facilities in Hiroshima. The Panel first met in December 2006, and plans to convene again on May 1-2. A final report on their recommendations will be submitted to both governments by November 2007.

19. (SBU) At the March 5-6 meeting, RERF announced future research plans that include determining lifetime cancer risks for the younger cohort of atomic bomb survivors, those in utero at the time of the bombings, and the children of survivors. RERF also plans to expand research of radiation effects on the risk of non-cancer diseases, such as cardiovascular diseases, on the above groups. The expanding sample collection and statistical dataset will allow for more powerful analyses. RERF also plans to strengthen their contribution to international radiation risk assessment efforts.

Scientific Council Highlights RERF's Unique Value

10. (SBU) There was broad agreement among the members of the Scientific Council that RERF's research on atomic bomb survivors is of unique value to the global scientific and medical community. Most immediately, participants in RERF's clinical studies benefit from increased health monitoring and information about future health

risks. Japan's broader public health community has also seen benefits: RERF's AHS database is being adopted as the standard cancer registry database in a growing number of Japan's prefectures.

Globally, RERF's continuing research can help governments and medical science to better evaluate the long-term risks to workers exposed to radiation at various doses, and can provide valuable insights for responding to radiation disasters. RERF's growing collection of thousands of biological samples is unique and can be preserved to enhance future scientific research efforts.

Continued USG Support for RERF Pays Many Dividends

¶11. (SBU) Comment: USG funding of RERF continues to support high-level scientific exchange between the U.S. and Japan across the disciplines of radiological biology, genetics, biostatistics, and epidemiology. As a prominent U.S.-Japan institution that actively engages thousands of Japanese affected by the atomic bombings, RERF serves as a powerful example of bilateral cooperation and the strength of our ties since the end of the Second World War. End Comment.

¶12. (U) USG/GOJ participants at the March 5-6 RERF Scientific Council Meeting:

U.S. Embassy Tokyo Participants:
Bart Cobbs, Deputy EST Counselor
Thomas (Toby) Wolf, EST Officer
Koichi Uchida, DOE Energy Specialist

GOJ Participant:
Kojiro Nogami, Deputy Director, General Affairs Division, Health Service Bureau, MHLW

SCHIEFFER